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APPLICANTS Shawn R. Irwin, Newberg, OR; Jonathan E. Myers, Portland, OR; Paul H. Johnson JR., Tigard, OR; J. Rick Halbirt, Hubbard, OR; Robin R. Winter, Newberg, OR;					
** CONTINUING DATA ***** <i>AK none</i>					
** FOREIGN APPLICATIONS ***** <i>AK none</i>					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 03/19/2004					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance		STATE OR COUNTRY OR	SHEETS DRAWING 8	TOTAL CLAIMS 59	INDEPENDENT CLAIMS 11
Verified and Acknowledged <u> </u> Examiner's Signature Initials					
ADDRESS 24197					
TITLE Modular dental chair equipment mounting system					
FILING FEE RECEIVED 2340	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		